

Medical English materials design: Connecting topics and tasks

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Abstract

Part I of this research study (Riley, 2005) presented preliminary results of a pre-course survey and post-course needs analysis administered to Japanese medical and pharmaceutical university students. The study addresses the predicament that many teachers, syllabus writers and course designers have in selecting course content and materials appropriate to both student interests and language learning needs. The study aims to identify a clearer picture of language learners with specific needs in order to apply this knowledge toward designing materials for classroom use. Part I results identified students' preferred focus for language learning skills, preferred course content for general English or medical English and preferred classroom groupings. Part II currently reports students' feedback regarding preferences for general English topics, specialty medical topics, controversial medical topics and classroom task types, as well as learner perceptions of the degree of usefulness of language tasks. The implications of these results for materials development are examined with reference to task-based language teaching principles by presenting an example of a collaborative classroom task designed to take into account the many variables toward addressing language learning needs.

Introduction

Although a number of evaluation of language learning courses and materials have attempted to obtain learners' feedback, in general post-course, there is less systematic research published on what learners in fact want or prefer their learning materials to do (Riley, 2005, p.205). This study presents, in two parts, issues related to designing materials that take into account the voices of medical and pharmaceutical university students in Japan.

Part I investigated students' preferred focus for language learning skills, preferred course content for general English or medical English and preferred classroom groupings. Part II attempts to further fill this research gap by obtaining learner feedback that helps identify topics and tasks for the needs of learners of English for specific purposes (ESP). Ascertaining language learning related needs can also provide teachers and course writers with a rationale for stating course goals and objectives that are tailored to the needs of a specific group of learners (Feez, 1998). Along with a belief in principles of task-based language teaching (TBLT), the results of the study have led to an interest for the author over the last 2-3 years in designing and piloting a variety of English language learning tasks and activities, primarily focusing on oral communication and building medical and health-related vocabulary.

Participants

The target population for Part II of this study at the University of Toyama, Sugitani Campus, comprises 29 male and 13 female university students in their third or fourth year of undergraduate study majoring in medicine and attending required English courses of fifteen, 90 minute lessons, once a week. Ages range from 21 to 38. The average age is 23.7 years and the average number of years studying English is 10.6 years, with a range of between 5 – 20 years. All students are native speakers of Japanese, four students already speak English very well and one student speaks French.

Instruments and procedures

A pre-course survey comprising three parts was administered to Medical year 1, 3 and 4 students in 2005 Spring and Fall semesters with the purpose of identifying: a) students' perceived preferences for language skills focus and improvement, b) how they felt about course content, and c) their preferred classroom groupings. A questionnaire comprising five parts was administered post-course and retrospectively for the

purpose of obtaining feedback regarding preferences for general English topics, specialty medical topics, controversial medical topics and classroom task types as well identifying learners' perceived usefulness of language learning tasks.

Part I Summary: Pre-course survey results

Initial research questions that were presented in Part I of this study are listed below, each with a summary of results. For this section, subjects surveyed were 1st and 3rd year Medical students and 1st year Pharmacy students. ($n=175$)

1. What English language skills do university students want to focus on and improve, in required English courses?

Results showed an overwhelming need or preference by learners to focus primarily on listening skills (121) followed by speaking skills (114). Of these speaking skills, responses extended to refer to specific aspects of speaking, - conversation (36), pronunciation (8), oral reports (2). The third most salient focus was vocabulary (35). Reading ranked higher than writing and grammar ranked lowest. Significantly, the majority of students wanted more exposure to English and more opportunities to practice and improve listening and speaking skills.

2. Do students prefer general English or medical English as the focus for course content?

Combined results showed 84.34% of all respondents wanted some component of medical English. However, (48.19%) indicated they preferred a course that offers a combination of general English and medical English. The remainder, 36.15%, wished to focus primarily on their major of medicine.

3. What are students preferred groupings in an English classroom?

Regardless of their major or difference in years of study, a significant number of students preferred to collaborate with each other, either in pairs or small groups (80.81%). This considerably outweighed those who preferred individual study (19.17%).

Part II

Research Questions

1. What language topics do students consider useful for a required medical English course?
2. What language learning tasks do students consider useful for a required medical English course?
3. How can results of student preferences best be applied to materials development?

Results and Discussion: post course

The subjects for this section of the survey were confined to medical 3rd and 4th year students as the course title for 3rd and 4th year medical courses in English, set by the Liberal Arts Department, is 'Medical English'.

Table 1: Medical-related topics ($n=42$)

3 rd & 4 th year medical	Rankings
1. General Medical Topics:	[22] Emergency Room (ER) [18] Medicine in other countries [17] Injuries and Wounds (e.g. fractures, bruises, burns, cuts) [15] First Aid [14] Body systems (circulatory, nervous, digestive, cardiovascular) [14] Sports injuries [14] Case studies of patients [12] Body Parts (brain, lungs, liver, heart, intestines) [12] Allergies [11] Diet & Nutrition [11] Hospices [10] Exercise & Sports [10] Stress [10] Cardiopulmonary Resuscitation (CPR) [10] The Skeleton

	[9] Smoking [9] Cold and 'Flu [9] Folk medicine
2. Medical Specialty Areas	(1 st) Cardiology [16]; (2 nd) Neurology [9]; (3 rd) Hematology [8]; Pediatrics [8]; Psychiatric care [8]; Music Therapy [8]; (4 th) Ophthalmology [8]; Oncology [7]
3. Diseases/Disorders	(1 st) Cancer [21]; (2 nd) AIDS [13]; (3 rd) Heart attack/stroke [10]; (4 th) Asthma [8]; (5 th) Diabetes [6]; Mumps [6]
4. Controversial Topics	(1 st) Drug Abuse [10]; (2 nd) Abortion [9]; Cloning [9]; Child Abuse [9] (3 rd) Sexually transmitted Diseases (STD's) [8]; Addictions [8]

[x] Indicates raw scores

Table 1 reflects 3rd and 4th year medical students' topic interests. In terms of useful health and medical-related topics, learners indicated a very wide range across all categories. Within *General Medical* topics, The ER is the most salient category, followed by students who want to know about medicine in other countries, although which countries were not established. Body systems and body parts both score highly and have a close relationship to what medical students are required to know in Japanese. The remaining General Medical topics listed above all tied in with topics experienced in the existing English language course at the time of the survey. One student wrote that Case Studies were 'especially interesting'. However, all the remaining areas of Neurology, Hematology, Pediatrics and Psychiatric Care, Music Therapy, Ophthalmology and Oncology scored similarly. Topics connected to General Medicine naturally provide a wider scope of sub-topics; but, study of Medical Specialty areas (section 2) and specific Diseases and Disorders (section 3) can often involve a greater number of low frequency vocabulary items. It is not clear whether this influenced respondents' choices in terms of using more difficulty vocabulary or if it can be safely assumed that learners are interested in these areas regardless.

Cardiology (structure, function and diseases of the heart) was the most salient *Medical Specialty* area. It is interesting to note that although in the USA and Japan, long term trends are favorable for coronary heart disease, results of this study perhaps reflect learners' interests to stay informed of all current trends in medical fields.

In the *Disease and Disorder* category, learners clearly expressed most interest in cancer. Cancer is a very broad topic as it relates to various kinds of cancer – lung, colon, breast, prostate, skin etc., as well as age-related and environmental variables. Perhaps the very complexity and breadth of this topic, along with increased mortality rates for lung cancer in Japan creates avenues of higher interest.

A considerable number of respondents did not select topics that were more controversial, but it is interesting to observe which controversial topics this particular group of medical students think may be important to know about.

Less favored topics (not listed in Table 1) were Environment and Health; Alcohol, In-flight health, The Hippocratic Oath, Health care systems, Insurance/Health plans, Genetics, Longevity and Transplants. Even fewer were interested in 'famous people and institutions in medicine'. Examples of choices provided in the survey were: Florence Nightingale, Christian Barnard (heart transplant), Alexander Fleming., Louis Pasteur, Aesculapius (Greek God of medicine), Wilhelm Roentgen (X-rays), Karl Landsteiner (blood groups), Mother Theresa, Red Cross, Medecins sans Frontieres (Doctors without borders). Respondents were also asked to circle topic categories in English they were unsure of. A few students indicated they were not 100% familiar with the meanings of the following topics:–'Flu, OTC's (over the counter drugs); In-flight health, Longevity, Cardiopulmonary Resuscitation (CPR); and Folk medicine.

Table 2: Classroom task types (n =42)

3 rd & 4 th year medical	Rankings *
Classroom tasks	(1 st) Studying and using medical and technical vocabulary [24] (2 nd) Reading news articles for both general news and health-related news [20] (3 rd) Studying and using general English, but health-related vocabulary [19] (4 th) Reading directions and warnings on medicine labels [10]; Presenting research orally to small groups [10] (5 th) Doing Internet research on personally selected topics [9]; Oral presentation of research to small groups [9] (6 th) Studying and using English idioms [8] (7 th) Doing role plays between doctors, nurses, patients, receptionists [7]

*= Respondents could check more than one

Table 2 presents salient classroom tasks that students identify as useful and interesting. Classroom tasks that focus on medical and technical vocabulary ranked the highest with all other task types having a strong connection to health and medical related topics. This illustrates the degree of importance that medical majors hold for incorporating medical and technical vocabulary throughout different task types and perhaps indicating that presenting vocabulary in context, versus in isolation, is critical. The need for reading skills is also evident with 2nd highest interest shown in reading news articles. Only three students showed interest in using functions (e.g. agreeing, apologizing, requesting, complaining etc) and only 2 in filling out forms (e.g. consent forms, prescriptions). It is unclear why so few would not want to practice or use necessary functions in English, but the lack of interest in filling out forms may be connected to Part I of this study where writing skills were not ranked highly.

One first year medical student who was being tutored prior to study abroad was interviewed independently. He identified explicit areas of English language use with regard to doctor- patient interaction. These included being able to explain and give information to a patient in layman terms (general English), express sympathy, calm a patient down, reassure a patient, understand a patient's emotions and describe symptoms in both medical and general English; for example, the jaw is known as mandible (comments paraphrased). He also completed a post-course survey and reiterated further: "Role play is a good way to learn English. For example, patients-doctor role play. Through this, we can learn how to say and what to say to patients in doctor's place and how to explain my health condition. Speaking, speaking, speaking!!"

Table 3: Perceived usefulness for studying English (n=42)

Question: Which of the following <u>uses</u> of English apply to you? [Please check the one column that best describes your opinion.]					
	I want to study English so that I can:	Very useful	Useful	A little useful	Not useful
1	Tell people about myself	17	20	3	1
2	Tell people about my family	7	22*	10	2
3	Tell people about my job	12	26*	3	1
4	Tell people about my education	6	18	13	3
5	Tell people about my interests	14	16	9	1
6	Talk to English-speaking friends	24*	11	3	0
7	Talk to co-workers	19	18	4	0
8	Use public transport	21*	15	6	0
9	Make travel arrangements	20*	17	3	0
10	Find new places in the city	11	19	9	0
11	Buy furniture/appliances for my home	4	11	22*	4
12	Speak to household repair people	3	19	13	0
13	Get information about goods & services	17	19	4	0
14	Complain about or return goods	5	21*	12	0
15	Speak to landlord/real estate agent	3	19	13	0
16	Talk to neighbors	10	18	11	2
17	Receive phone calls	20*	17	6	0
18	Make telephone calls	19	15	6	0
19	Do further study	18	15	5	0
20	Get information about courses/schools	12	14	14	0
21	Get information about a job	16	15	8	1
22	Apply for a job	13	21*	4	2
23	Attend interviews	12	19	5	2
24	Join sport or social clubs	9	25*	7	5
25	Watch TV	17	17	5	3
26	Listen to the radio	14	17	6	2
27	Read newspapers, books, magazines	20*	18	3	0
28	Give, accept, refuse invitations	12	19	7	0
29	Other reason(s)	Sing songs			

Table 3 provides a wide range of perceived usefulness of English and reasons for studying English. Since the Japanese learners in this study are learning English as a Foreign Language (EFL) versus English as a Second Language (ESL), it is understood that in responding to this survey, learners are likely applying each use to situations outside Japan such as study abroad, foreign employment opportunities or independent international travel.

The most significant 'skill' considered very useful is to talk to English speaking friends. Given that these learners are in an EFL environment with few opportunities for them to make English-speaking friends, it is not surprising that they wish to experience this first and foremost. Classroom tasks can only simulate speaking opportunities between friends of different cultures.

Other salient uses of English perceived as very useful are making and receiving phone calls, talking to co-workers (connected to communication skills); using public transport, making travel arrangements (connected to necessary travel), and reading newspapers, books, magazines, watching TV (connected to the need to understand written and aural language).

Of the 29 uses listed, 19 were considered 'useful' indicating learners are interested in a wide range of uses for English. The most salient is telling people about their job and also about their family, indicating what is important in their daily lives and the need to communicate about these. Second most useful is using English to join a sports or social club. It is possible that students by nature of their medical major are also interested in general health and fitness. However, they also show a high interest in using English to apply for a job and seemingly unrelated, to complain about or return goods. In total, the majority of categories were considered very useful or useful, with only a few considered not useful. Those considered only a little useful were to buy furniture/appliances for their home and speak to household repair people. This makes sense as students who study abroad or travel are not generally faced with separate accommodation expenses.

Task design

Research Question 5: How can results of student preferences best be applied to materials development? Based on the extensive range of topics identified by learners, the extensive reasons for wishing to use English, students preferred groupings, and the fact students want both general and medical English, how can this combination of preferences be incorporated into a task that collectively: a) fits the university syllabus goals, b) addresses different learning styles, c) provides both medical and general English, and d) incorporates the four basic language skills of reading, writing, listening, and speaking although with a focus on the latter two skills.

One solution is to design tasks that provide opportunities for students to select their own topics of interest rather than more invariable topics, thus providing ownership in the task and increasing motivation (Ellis, 2006) and learner autonomy (Benson & Voller, 1997). Additionally, designing tasks that require learners to use language rather than reproduce it provides greater chances of acquisition (Ellis, 2003) and is in accordance with the underlying principles of task based language teaching (TBLT) discussed later in this paper.

A sample task

For the purposes of demonstrating how results of this study can be used, a collaborative classroom task designed to take into account the many variables toward addressing learner needs is presented in Appendix A. The task objectives require learners to carry out a survey about a self-selected topic and report their findings in a written report, which is presented orally to a group. Avenues of assessment are (i) a written report evaluated by the teacher, and (ii) a self evaluation form requiring reflection on the part of the learner. Although requiring some writing skills, the task primarily focuses on a variety of oral communication skills needed to successfully complete the task and combines general English with English for specific purposes (ESP). In the process of this task, learners could choose to work alone or with a partner but were ultimately required to collaborate in small groups. Importantly, learners could choose to link their survey topic to their medical major, or a topic of personal interest.

When designing a task-based lesson with a task as the principal component, various designs for TBLT methodology have been put forward such as Willis (1996), Skehan (1996) and Ellis (2006). These all have three main phases in common and reflect the chronology of the task: 1) Pre-task (planning, framing the activity), 2) Main task (during, prescriptive, reactive), 3) Post task (practice). Willis (1996) provides further discussion on a three phase task cycle that includes opportunities for post-task consciousness-raising and practice activities. Activities from pre and post task phases are not necessarily required but are considered useful components.

A series of tasks

The task presented in this study is in three phases and designed to be task-dependent; that is, the sequence of each task is dependent on an earlier one or ones and successful completion of one step in a task should lead to the next (Johnson & Morrow, 1981; Johnson, 1982). It is also an ‘open’, versus ‘closed’, task where learners know there is no single pre-determined outcome (Ellis, 2003) and learners can use any linguistic resources at their disposal in order to successfully complete the task (Nunan, 2004). In the sample task for this study, some task steps are not specifically shown or addressed, but as learners work through the process, they uncover sub-tasks requiring degrees of problem-solving in order to successfully complete the task. Within the three phases of the task, learners needed to:

- think through the whole process before beginning
- choose their own topic of investigation
- formulate a survey question and follow-up questions where necessary
- decide who to ask
- practice asking the survey question and answer other students’ questions
- find ways to interact with people in and out of the classroom
- decide how to record biographical information and data in note form
- if partnered, work collaboratively and share information
- find ways to present the data in graphic form
- analyze the data and present information and data in a written report
- speak about the survey report to peers
- field impromptu questions and optionally, discuss further
- be active audience listeners and ask questions
- reflect on their oral performance and complete a self-assessment form

With regard to the latter sub-task, learners had pre-knowledge of avenues of assessment and could therefore choose to spend time addressing the criteria listed for both forms: (i) a written report assessed by the teacher and (ii) a self evaluation form requiring reflection immediately after the oral presentation to a group. Overall, in completing the task objectives, opportunities to use English is exponential:

Using English during individual planning → interaction in pairs → classroom development → interviewing in corridors & campus → in some cases, communication outside university

To date, the task presented in Appendix A has been piloted extensively for classroom use. Sample results of student-designed survey questions that reflect personal interest and connection to their area of major study are presented in Appendix B. Completed examples of medical student surveys are available on request from the author.

Key characteristics of a task

In both research and language pedagogy there are numerous definitions as to what constitutes a task. This is due in particular to the complex dimensions of a task such as scope, perspective, authenticity, linguistic skills needed, psychological processes and task outcomes (Ellis, 2003). While such definitions vary, they all emphasize the use of communicative language for pedagogical tasks. For further discussion regarding definitions of task see, for example, (Long, 1985; Prabhu, 1987; Breen, 1987; Nunan, 1989; Skehan, 1996). It is also important to recognize that tasks involve cognitive dimensions which can vary in their complexity depending on requirements put on learners (Robinson, 2001). Processes such as selecting, reasoning, sequencing information and classifying, deducting and evaluating are examples of cognitive processes, although not all tasks require the same skills (Ellis, 2003). When designing the task presented in this study the underlying principles of TBLT were closely considered with the aim of incorporating salient characteristics.

Skehan (1998) puts forward 5 key characteristics of a task as follows: 1) learning is primary, 2) learners are not given other peoples’ meaning to regurgitate, 3) there is some sort of relationship to comparable real-world activities, 4) task completion has some priority, and 5) the assessment of the task is in terms of outcome. Ellis (2003) refers to criterial features of a task and like Skehan, also emphasizes that a task entails a primary focus on meaning, the involvement of real-world processes of language use, where participants choose the linguistic resources to use, and there are clearly defined communicative outcomes. ‘Outcome’ refers to what learners arrive at when they complete the task. ‘Aim’ refers to the pedagogic purpose of the task. Ellis (2006) elaborates further on characteristics for TBLT, describing a task as one that can involve any of the four language skills (both receptive and productive) engages cognitive processes, caters to the development of

communicative fluency but without neglecting accuracy, and provides opportunities for natural learning in the classroom.

Experiential Learning

Experiential learning closely resembles a number of TBLT principles. Experiential learning incorporates learning by doing, where active involvement of the learner is central to the approach and takes the learner's personal experience as a point of departure (Nunan, 2004). Kohonen's (1992) model of experiential learning for language teaching supports a holistic attitude towards subject matter, encourages active learner participation in small, collaborative groups, promotes self-directed versus teacher-directed learning, emphasizes process versus product which incorporates learning how to learn, self-inquiry, and social and communication skills (Nunan, 2004, p.12). Taken as a whole, task-based pedagogy reflects various approaches that are attracting increased attention such as the need for more learner-centered curricula and the role of meaning-based tasks.

Principles of materials design

Paralleling a TBLT perspective woven into designing tasks it is also necessary to consider principles of materials design. Johns (1985) identifies three main principles. First, a task should be authentic and related to the students' real world challenges. Learners should be exposed to language in the classroom that is as close as possible to the language they expect to use outside the classroom. Second, the language learning goals of the learners should be relevant and closely aligned to tasks performed in the classroom. Third, the two main purposes for using language, to convey information and social interaction, should be evident in task design. Additionally, some basic principles of second language acquisition relevant to the development of materials for teaching language are outlined by Tomlinson (1998, pp 7-22). He states materials should achieve impact, help learners feel at ease and develop confidence, what is being taught should be perceived by learners as relevant and useful, and require and facilitate learner self-investment. Learners must be ready to acquire the points being taught and their attention should be drawn to linguistic features of the input. Materials should also provide the learners with opportunities to use the target language to achieve communicative purposes, take into account that the positive effects of instruction are usually delayed and that learners differ in learning styles and in affective attitudes, permit a silent period at the beginning of instruction, maximize learning potential by encouraging intellectual, aesthetic and emotional involvement which stimulates both right and left brain activities, not rely too much on controlled practice, and provide opportunities for outcome and feedback. This extensive list illustrates the complexity and depth of what a materials designer needs to consider.

Topics

Factors of topic familiarity and topic importance are key issues to consider when designing materials. It is not unreasonable to assume that the variable of 'topics' is likely to interact with learner variables. Gass and Varonis (1984) reported a clear effect on comprehension when learners were familiar with a topic and this also influenced to what extent negotiation of meaning took place. Other research that has looked at shared perceptions of topic interest or fields of expertise suggests topic importance and topic familiarity may influence the interaction that a task requires (Ellis, 2003).

Assessment

One constraint of the current study is the need to further investigate and account for ways to assess tasks. The process of operationalizing task-based second language performance assessment, the evaluation of task difficulty and the development of criteria for rating learner performance on different tasks still requires intensive investigation (for more details see Skehan, 2001; Brown, et al, 2002; Norris, 2005).

Pedagogical implications

>From opportunities to observe learners carrying out the different phases of the task during the piloting of the task presented in this study, the following pedagogical benefits, shown in parentheses, were identified. Learners:

- were required to think through the process before beginning (planning)
- chose their own topic of investigation (ownership)

- were asked to link their research topic to their major, or investigate a topic of personal interest (using prior knowledge)
- could choose to work alone or with a partner E.g. designing a research question, deciding which biographical information to include, how to present graphic results, how to deliver results to peers in the final oral report, work collaboratively and share information (planning, collaboration)
- repeatedly asked their survey question in English (oral practice).
- listened to subjects' responses and recorded their results (organizing information)
- needed to read over their data and make summary statements (analyzing information, reading and writing practice)
- checked grammar and syntax with the teacher or a peer (error correction)
- interacted with people in and out of the classroom (social communication)
- when giving an oral report, needed to actively listen and respond to questions (paying attention, impromptu response)
- completing a self-evaluation (reflection)

Many studies indicate that providing guidance, time and opportunity for learners to plan off-line, that is before a task is done, can increase complexity of language production and that "...learners attention to fluency, accuracy, and complexity can be manipulated by means of the kind of planning they are required to undertake" (Ellis, 2003, p. 134). The pedagogical benefits identified above are considered to be in keeping with the course goals and objectives of the University of Toyama syllabus for Medical English, which state:

Primary Goal:

To provide opportunities for students to use English in contexts related to medical English.

Objectives:

1. To practice and build listening and speaking skills and strategies in English.
2. To increase grammatical accuracy and personal confidence in oral communication.
3. To improve pragmatic competence.
4. To develop medical vocabulary.

Future considerations

Since teachers cannot be sure exactly how learners may perform or achieve a task, it may be useful to incorporate features of learning strategies in the task design as well as dimensions of self-regulated learning (Dornyei, 2005; Rubin, 2006) thus shifting the roles of the teacher and providing opportunities for learners to be more aware of and more responsible for their own language learning beyond the walls of the classroom. By using 'task' as a basic unit of learning, and by incorporating a focus on strategies, we open to the students the possibility of planning and monitoring their own learning..." (Nunan, 2004, p.15). The author is currently conducting further research to determine to what extent the task may be adapted across different language learning environments in Japan (Riley, 2007).

Conclusion

Although survey results don't always tell us what we want to know, for materials designers and practitioners, listening to the voices of learners is an important part of making informed curricular decisions. For those of us in positions of accountability, concrete evidence is needed to show how we arrived at these significant and critical decisions that can affect so many individuals. Taking learners' needs into account when designing classroom materials can better assist students with specific language learning needs and help them learn more effectively. Identifying topics of student interest and connecting these to TBLT principles can also help address students' professional and classroom identity as future doctors, and as a cohort of students learning English and medical English together. It is hoped the learner feedback collated from this study provides useful information for teachers, materials designers and curriculum developers about components of task design to best benefit their specific learners.

"Tell me and I will forget, show me and I will remember, involve me and I will understand." *Chinese Proverb*

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Appendix A

SURVEY ON HEALTH-RELATED ISSUES



Task Objectives: 1) to carry out a survey about a topic you want to know about.
2) to try to find an answer to your question.
3) to report your findings in: i) a written report, and ii) an oral report to a group

A. TASK INTRODUCTION and STEPS

1. Work: a) by yourself, or b) with a partner.
2. You are encouraged to connect your survey to a medical or health-related topic.
3. Think about a topic you are interested in and write a clear research question.
4. Ask a minimum of 20 people the same question and record the results.
NOTE: Record whether participants are male or female, their age and any other useful factors.
5. After you have collected your data, present the information in a chart, graph or table. (*see models*)
6. Look over your data, think about it, and write:
a) two statements that analyze the data; b) one general concluding statement.

EXAMPLE (A) Question: Do you think medical students should have a part time job?

Statement 1. The majority of Japanese people surveyed (81%), don't think medical students should work part-time.

Statement 2. Reasons for this included lack of time, distraction from their study, increased stress and decreased sleep.

General conclusion Although there are reasons both for and against medical students having part-time jobs, in general, it is thought the negative effects should discourage students from having one.

EXAMPLE (B) Question: If a patient is dying, should the doctor inform him or her?

Statement 1 Seventy four percent of medical students agree patients should be told if they are dying in contrast to 59% of the general public who think patients shouldn't be told.

Statement 2. Twenty five percent more women than men think terminal patients should be told about their medical condition.

General conclusion. Men and women in the medical profession have a different perspective about telling patients they are dying compared to family members.

Brainstorm your survey question ideas here → _____

State the reason(s) why you are interested! _____

B. TASK PLANNING (circle your answers)

CHECKLIST

1. I am working a) by myself, b) with a partner.
2. My survey question is clear. Yes/No/Unsure
3. My survey question is grammatically accurate. Yes/ No. If unsure, I can check by _____
4. My survey question is: a) open-ended (various answers), b) closed (e.g. Yes/No), c) has follow-up questions, d) provides options (a., b., c, d,)

COLLECTING DATA

1. Who will you ask? _____
2. Will it be useful to record bio-data? (e.g. age, gender, major, years of study, other) _____
3. How will you record your data? Make a plan in the space below to suit a way to record answers
(Look at the models for ideas.)

C. WRITTEN REPORT CHECKLIST: Check (✓)

- name(s) and ID# at the top of the page
- the survey question(s)
- a clear and valid reason for choosing the survey question(s)
- the number of people asked
- biographic information such as gender, age, job, etc.
- a graph, chart or table of the results
- extra information from subjects, such as reasons given for an answer (optional)
- two sentences that analyze the data (specific details)
- one general concluding statement about the topic

D. ORAL REPORT GUIDELINES: You will present the results of your survey to your group.

Outside class:

1. When your report is finished, practice speaking. Look at the self-evaluation chart on page 4.
Think about volume, pace, pronunciation, intonation, stress, eye contact, body language.
Try to speak rather than read your report.
2. Time how long you will speak. If you have a partner, share the time equally.
For example, for 2 students – Allow 1-2 minutes each speaking; 3-4 minutes to answer questions from group members; approximately 8 -9 minutes total, per presentation.

In class:

1. Give a greeting; introduce yourself and explain your survey question.
2. Describe what you did and explain the results, using visual aids (graphs, tables, charts).
3. Answer any questions from your group members.
4. Record these questions immediately on your self-evaluation form (see page 4).
5. When all group members have finished their presentation, fill out your self-evaluation form.

Give your written report and self-evaluation form to your teacher on _____ (date)

Comments or questions for your teacher →

Student Self Evaluation: “MEDICAL ENGLISH SURVEY, ORAL PRESENTATION ”

Speaker's name: ID#.....

Think about your oral presentation to your group. Circle your self-evaluation.

A. Report content/organization

- | | | | | |
|---|-----------|-----------|------|-----------------|
| <input type="checkbox"/> information is interesting | excellent | very good | good | needs improving |
| <input type="checkbox"/> ideas are organized well | excellent | very good | good | needs improving |
| <input type="checkbox"/> content was understood | excellent | very good | good | needs improving |

B. Oral presentation

- | | | | |
|---|-------------|-------------|----------|
| <input type="checkbox"/> my volume | too loud | about right | too soft |
| <input type="checkbox"/> my speed | too fast | about right | too slow |
| <input type="checkbox"/> my pronunciation | excellent | very good | good |
| <input type="checkbox"/> my gesture | excellent | very good | good |
| <input type="checkbox"/> my eye contact | excellent | very good | good |
| <input type="checkbox"/> I spoke, not read | excellently | very well | well |
| <input type="checkbox"/> I answered questions | excellently | very well | well |

*NA = not applicable

Record any group questions and your answers below.

Question 1

My answer

Question 2

My answer

I asked my survey question(s) using English -- a) all b) most c) some d) none --of the time
 I needed to translate my survey question(s) into Japanese -- a) all b) most c) some d) none --of the time

Teacher Evaluation: “MEDICAL ENGLISH SURVEY WRITTEN REPORT ”

Name: ID#

	Task completion	Points
1	Clear survey question	2
2.	Clear reason explaining why the question was asked	2
3	Minimum 20 subjects	1
4	Results shown using graphs, charts or tables	5
5	Two statements that analyze the data	6
6	One general statement about the overall survey result	2
7	Grammar, syntax and vocabulary	2
	TOTAL :...../20	

Comments:

Appendix B
Survey on Health-Related Issues: Student Research Questions

Sample survey questions composed by year 3 and 4 medical students are presented below as outcome from the piloted task and are representative of a very wide range of topics. They reflect interest in and connection to students' major, provide rationale for selection of topic or theme, compare differences between men and women, and demonstrate differing question forms including yes/no questions, follow-up questions, open-ended questions or options (a. b. c. d.).

1. Q. 1) Which do you like better – Japanese or Western food? Q. 2) What is your favorite dish?
Reason: It is said that Japanese traditional food is very good for health these days. But almost all young people are not interested in this topic, I think'.
2. Q. 1) When you graduated from high school, at what age did you want to get married?
Q. 2) Now, at what age do you want to get married?
Reason: 'I want to know the difference of thinking about marriage between male and female and the change after entering a medical college.'
3. Q. 1) Do you belong to any exercise club? Q. 2) How long do you exercise in a day?
Q. 3) Do you think that a doctor needs power (strength)?
Reason: 'Whether my classmates think a doctor needs strength or not, and whether they now make their strength or not.'
4. Q. 1) How many brothers and sisters do you have?
Q. 2) How many children do you want to have in the future? '
Reason: Lately in Japan, it is said the birth rate is decreasing, but medical students who want to have more than one child is most'.
5. Q. 1) What prefecture do you want to work in after graduation?
Q. 2) Why? Q. 3) Where is your hometown?
Reason: 'I'm interested in these questions because I want to know how many medical students will stay in Toyama.'
6. Q. 1) Are you working part time? Q. 2) How much allowance do you get from your parents every month?
Q. 3) How much money do you earn from a part-time job every month?
Please choose from the following the reasons why you work part-time.
a) for money b) for a hobby c) experience d) unsure
Please choose the reason why you do not work part time: a) it's unnecessary b) there is no time
c) other _____
7. Q. 1) What is your ideal cause of death?
Reason: 'All people approach death some day. Recently in Japan, it is said that young men who deal with death daily have been decreasing in number. How do young men who chose to take up the occupation of a doctor, (with many opportunities to attend at the spot of death), consider their own death?' Results: Refer to the super-aged society.